10541369 - GAU: 3739 Receipt date: 09/13/2007 TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT Docket No. O \ (Quader 37 CFR 1.97(b) or 1.97(c)) 18969 Takeski Yokoi, et al. In Re Application of: SEP 1 3 2007 Customer No. Application No. **Group Art Unit** Confirmation No. Examiner 10/541,369 23389 8936 July 5, 2005 3736 Unassigned Title: MEDICAL DEVICE Payment of Fee (Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p)) A check in the amount of is attached. The Director is hereby authorized to charge and credit Deposit Account No. 19-1013/SSMP as described below. Charge the amount of \boxtimes Credit any overpayment. X Charge any additional fee required. Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. Certificate of Transmission by Facsimile* Certificate of Mailing by First Class Mail I certify that this document and authorization to charge deposit I hereby certify that this correspondence is being deposited account is being facsimile transmitted to the United States with the United States Postal Service with sufficient postage Patent and Trademark Office (Fa as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on September 10, 2007 (Date) (Date) Signature of Person Mailing Correspondence Signature Peter I. Bernstein Typed or Printed Name of Person Signing Certificate Typed or Printed Name of Person Mailing Certificate *This eertificate may only be used if paying by deposit account. Dated: September 10, 2007 Signature Peter I. Bernstein Registration No. 43,497 Scully, Scott, Murphy & Presser, P.C. 400 Garden City Plaza, Suite 300 Garden City, New York 11530 516-742-4343

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cc: